VOTER REGISTRATION DRIVE COMPLAINT

COLORADO SECRETARY OF STATE 1700 BROADWAY, SUITE 270 DENVER, COLORADO 80290 PHONE: 303-894-2200

FAX: 303-869-4861

COMPLAINANT'S INFORMATION (County or State employees need only provide name, title, and phone number.) Last Name: _____ First Name: Home Phone: Work Phone: Residence Address: City: _____ Zip Code: Mailing Address (If different from above): City: _____ Zip Code: VRD AGAINST WHOM COMPLAINT IS BROUGHT (LIMIT ONE VRD PER FORM) VRD Organization Name (If known): VRD Unique Number (If known): Date and Location, including County, of Alleged Violation (If known): ALLEGED VIOLATIONS OF STATE LAW Pursuant to Section 1-1-107(2)(b), C.R.S., the Secretary of State is granted independent authority to inspect and review the practices and procedures of county clerks and recorders, election commissions, their employees, and other election officials in the conduct of primary, general, and congressional vacancy elections and the registration of electors in this state, with or without the filing of a complaint by any person. □ VRD Organizer failed to file a statement of intent. □ VRD Organizer failed to maintain a designated agent in the state. □ VRD Organizer used an unapproved form. □ VRD Organizer failed to fulfill the mandatory training requirements. □ VRD Organizer willfully failed to deliver an application to the proper county within the time prescribed. □ VRD Organizer compensated a circulator based on the number of applications the circulator distributed or collected. □ Other. Please forward any supporting information you may have along with this complaint form. **ATTESTATION** I declare, under penalty of perjury under the laws of the State of Colorado, that the foregoing is true and correct. Signature of Complainant: ______ Date:

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INSTRUCTIONS FOR FILING A COMPLAINT

- 1. Pursuant to the Election Rules of the Secretary of State, any person who believes a VRD organizer or circulator has committed any of the violations listed in § 1-2-703 of the Colorado Revised Statutes may file a written complaint with the Secretary of State.
- 2. When filing a complaint, please ensure that ALL FIELDS are completed to the best of your ability. Failure to adequately complete the form may cause undue delay in the VRD investigation.
- 3. At the minimum, a complaint form must contain the following (County or State employees need only provide name, title, and phone number.):
 - a. The complainant's full name;
 - b. The complainant's full residence address and mailing address (if different from residence);
 - c. A description of the alleged violation. Please check the box next to the appropriate violation in the shaded area of the complaint form.
- 4. Additional information to be included, if known:
 - a. The name of the Voter Registration Drive;
 - b. The unique number assigned to the Voter Registration Drive;
 - c. Any other applicable or relevant information. Please attach any additional information or documentation that you feel may help the Secretary of State's office in the conduct of its investigation.
- 5. After you have completed the form and included all relevant information, sign and date the Attestation section at the bottom of the form.
- 6. The complaint may be submitted by fax to the number on the top of the form or by mail to:

COLORADO SECRETARY OF STATE
ELECTIONS DIVISION
ATTN: TROY BRATTON
1700 BROADWAY, SUITE 270
DENVER, COLORADO 80290

7. If you have any questions or require any assistance in completing this form, please contact the Secretary of State's office at 303-894-2200, ext. 6323.